FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30, 2008
Estimated average burden
Hours per response.......16.00

SEC USE ONLY			
Prefix Serial			
DATE RECEIVED			

Name of Offering (SEC MI RECEIVED CO	
Filing Under (Check box(es) that apply): Rule 504 Rule 505	Rule 506 Section	4(6) ULQE	
Type of Filing: New Filing Amendment		DEC 1 9 2002	
A. BASIC IDEN	TIFICATION DATA	2007	
Enter the information requested about the issuer			
Name of Issuer (check if this is an amendment and name has changed,	and indicate change.)	188	
Brenner West Capital Qualified Partners, LP			
Address of Executive Offices (Number and S 110 East 42 nd Street, Suite 1419, New York, NY 10017	treet, City, State, Zip Code)	Telephone Number (Including Area Code)	
Address of Principal Business Operations (Number and S) (if different from Executive Offices)	RROGESSED	Telephone Number (Including Area Code)	
Brief Description of Business	DEC 3 1 2007		
Private Investment Partnership	THOMOGN	I KRONIN BEMBI KRONI BENEK KOMBO BITAT 1818 I BATA ING I FEB	
	THOMSON		
Type of Business Organization	FINANCIAL		
corporation imited partnership, already former		lease specify): 07086981	
business trust limited partnership, to be formed			
Month	Year		
Actual or Estimated Date of Incorporation or Organization	0 5 Actual	□ Estimated	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:			
CN for Canada; FN for other foreign jurisdiction) D E			

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on the ULOE must file a separate notice with Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

AT.	TEN	TION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9

, A. BASIC IDENTIFICATION DATA					
2. Enter the information requested for the following:	2. Enter the information requested for the following:				
 Each promoter of the issuer, if the issuer has been org 	• Each promoter of the issuer, if the issuer has been organized within the past five years;				
Each beneficial owner having the power to vote or di	spose, or direct the vote or disposition of, 10% or	more of a class of equity securities of the issuer.			
Each executive officer and director of corporate issue	ers and of corporate general and managing partner	s of partnership issuers; and			
Each general and managing partner of partnership iss	suers.				
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial O		General and/or Managing Partner			
Full Name (Last name first, if individual) Brenner West Capital Investors, LLC					
Business or Residence Address (Number and Street, City, Str 110 East 42 nd Street, Suite 1419, New York, NY 10017	ate, Zip Code)				
Check Box(es) that Apply: Promoter Beneficial O	wner Executive Officer Director Of General Partner	☐ General and/or Managing Partner of the Gen. Partner			
Full Name (Last name first, if individual) Nerenberg, Craig					
Business or Residence Address (Number and Street, City, Str c/o Brenner West Capital Investors, LLC, 110 East 42nd St					
Check Box(es) that Apply: Promoter Beneficial O	wner	☐ General and/or Managing Partner of the Gen. Partner			
Full Name (Last name first, if individual) Kaufman, Joshua					
Business or Residence Address (Number and Street, City, St. c/o Brenner West Capital Investors, LLC,110 East 42nd Str					
Check Box(es) that Apply: Promoter Beneficial O	wner Executive Officer Director Of General Partner	General and/or Managing Partner of the Gen. Partner			
Full Name (Last name first, if individual)					
Business or Residence Address (Number and Street, City, Sta	ate, Zip Code)				
Check Box(es) that Apply: Promoter Beneficial O	wner	General and/or Managing Partner			
Full Name (Last name first, if individual)					
Business or Residence Address (Number and Street, City, St.	ate, Zip Code)				
Check Box(es) that Apply: Promoter Beneficial O	owner Executive Officer Director Of General Partner	General and/or Managing Partner			
Check Box(es) that Apply: Promoter Beneficial O Full Name (Last name first, if individual)	_				
	Of General Partner				
Full Name (Last name first, if individual)	Of General Partner ate, Zip Code)				
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, St.	Of General Partner ate, Zip Code) where Executive Officer Director	Managing Partner			
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, Str. Check Box(es) that Apply: Promoter Beneficial O	Of General Partner ate, Zip Code) wher	Managing Partner			

2 of 9

F	B. INFORMATION, ABOUT OFFERING					
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.	Yes No				
2.	What is the minimum investment that will be accepted from any individual?	\$ <u>1,000,000*</u>				
3.	Does the offering permit joint ownership of a single unit?	Yes No ⊠ □				
4.						
Full	Name (Last name first, if individual)					
Bus	ness or Residence Address (Number and Street, City, State, Zip Code)					
Nan	ne of Associated Broker or Dealer					
Stat	es in Which Person Listed Has Solicited or Intends to Solicit Purchasers					
	(Check "All States" or check individual States)	🗌 All States				
AL	AK AZ AR CA CO CT DE DC FL GA	HI	ID			
IL	IN IA KS KY LA ME MD MA MI MN	MS	МО			
MT	NE NV NH NJ NM NY NC ND OH OK	OR	PA			
RI	SC SD TN TX UT VT VA WA WV WI	WY	PR			
Full Name (Last name first, if individual)						
Bus	ness or Residence Address (Number and Street, City, State, Zip Code)					
Nan	e of Associated Broker or Dealer					
Stat	es in Which Person Listed Has Solicited or Intends to Solicit Purchasers					
	(Check "All States" or check individual States)	🔲 All States				
AL	AK AZ AR CA CO CT DE DC FL GA	н	ID			
IL	IN IA KS KY LA ME MD MA MI MN	MS	МО			
МТ	NE NV NH NJ NM NY NC ND OH OK	OR	PA			
RI	SC SD TN TX UT VT VA WA WV WI	WY	PR			
Full Name (Last name first, if individual)						
Bus	iness or Residence Address (Number and Street, City, State, Zip Code)					
Name of Associated Broker or Dealer						
Stat	es in Which Person Listed Has Solicited or Intends to Solicit Purchasers					
(Check "All States" or check individual States)						
AL	AK AZ AR CA CO CT DE DC FL GA	HI	ID			
IL	IN IA KS KY LA ME MD MA MI MN	MS	МО			
MT	NE NV NH NJ NM NY NC ND OH OK	OR	PA			
RI	SC SD TN TX UT VT VA WA WV WI	WY	PR			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.) 3 of 9

^{*} Miniumum subject to waiver by the general partner in its sole discretion.

_	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Pri		Amount Already Sold
	Debt	\$ -0-		\$ <u>-0-</u>
	Equity	\$ <u>-0-</u>		\$ <u>-0-</u>
	Common Preferred			
	Convertible Securities (including warrants)	\$ -0-		\$ <u>-0-</u>
	Partnership Interests	\$ 1,000,000,00	<u>)*</u>	\$ 21,245,046
	Other (Specify)	\$ <u>-0-</u>		\$ -0-
	Total	\$ 1,000,000,00	<u>)*</u>	\$ 21,245,046
	Answer also in Appendix, Column 3, if filing under ULOE.			
2,	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	9		\$ 21,245,046
	Non-accredited Investors	-0-		\$ -0-
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.	•		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offering of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Questions 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505		_	\$
	Regulation A			s
	Rule 504			\$
	Total			\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			\$ <u>N/A</u>
	Printing and Engraving Costs		\boxtimes	\$ _1,000
	Legal Fees	**********	\boxtimes	\$ 20,000
	Accounting Fees		\boxtimes	\$0-
	Engineering Fees	•••••		\$ <u>N/A</u>
	Sales Commissions (specify finders' fees separately)			\$ <u>N/A</u>
	Other Expenses (identify) Registration costs	•••••	Ø	\$ 4,000
	Total		\boxtimes	\$ 25,000

⁴ of 9

^{*} The Issuer is offering an unlimited amount of limited partnership interests. The Issuer does not expect to sell in excess of \$1,000,000,000 in limited partnership interests. Actual sales may be significantly lower.

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
5.	b. Enter the difference between the aggregate offering price given in response to Part C — Que and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted proceeds to the issuer." Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used of the purposes shown. If the amount for any purpose is not known, furnish an estimacheck the box to the left of the estimate. The total of the payments listed must equal the adjusted	1 gross sed for te and	\$ <u>999,975,000°</u>
	proceeds to the issuer set forth in response to Part C — Question 4.b. above.	Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	∅ \$ <u>-0-</u>	⊠ \$ <u>-0-</u>
	Purchase of real estate	⊠ \$ <u>-o-</u>	⊠ \$ <u>-0-</u>
	Purchase, rental or leasing and installation of machinery and equipment	⊠ \$ <u>-0-</u>	⊠ \$ <u>-0-</u>
	Construction or leasing of plant buildings and facilities	以 \$ <u>-0-</u>	S <u>-0-</u>
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) Repayment of indebtedness Working capital Other (specify):	⊠ \$ -0- ⊠ \$ -0- ⊠ \$ -0-	□ \$ <u>-0-</u>
		⊠ \$ <u>-0-</u>	⋈ \$ <u>-0-</u>
	Column Totals	⊠ \$ <u>-0-</u>	⋈ \$ <u>999,975,000</u> *
	Total Payments Listed (column totals added)		9,975,000*
	D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this nature constitutes and undertaking by the issuer to furnish to the U.S. Securities and Exchange C information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 50	ommission, upon writt 2.	

Issuer (Print or Type) Brenner West Capital Qualified Partners, LP

Name of Signer (Print or Type) CRAIG NEXENDERS

Title of Signer (Vrint or Type)

Managing Member of Brenner West Capital Investors, LLC, the general partner

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S. C. 1001.)

5 of 9

* The Issuer is offering an unlimited amount of limited partnership interests. The Issuer does not expect to sell in excess of \$1,000,000,000 in limited partnership interests. Actual sales may be significantly lower.